

CALIFORNIA EMERGENCY MANAGEMENT AGENCY (Cal EMA)

PROGRAM: Elder Abuse Advocacy & Outreach

PERFORMANCE ASSESSMENT / SITE VISIT REPORT

1. **GRANT AWARD NUMBER:** EA09120560 **DATE OF SITE VISIT:** 07/13/2010
2. **GRANT PERIOD:** 10/01/2009 - 09/30/2010
3. **RECIPIENT/IMPLEMENTING AGENCY:**
County of Ventura District Attorney's Office
4. **PROJECT DIRECTOR:**
Michael Schwartz, Special Assistance District Attorney

PERSONS INTERVIEWED DURING SITE VISIT:

<u>NAME</u>	<u>TITLE</u>	<u>AGENCY</u>
Catherine Duggan	Senior Program Admin.	DA's Office, V.W.
Barbara Dixon	Program Administrator	DA's Office, VW
Linda Finnerty	Supervisor Victim Service	DA's Office, V.W.
Pat Wood	V/W Advocate (EA)	DA's Office, V.W.
Susy Rios	V/W Advocate (SE)	DA's Office, V.W.

Signature of Program Specialist

11/01/10
Date

Signature of Section Chief

11/11/10
Date

Signature of Project Representative

Date

PERFORMANCE ASSESSMENT/SITE VISIT REPORT

SECTION I – ADMINISTRATIVE and PROGRAMMATIC REVIEW

1. OPERATIONAL DOCUMENTS

YES NO N/A

Review hard copy/verify the ability to access on line:

- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| • The Cal EMA Recipient Handbook (R.H.) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • The Approved Grant Award Agreement | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • The RFA/RFP (supersedes the requirement of the R.H.) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • The Program Guidelines (supersedes the requirement of the R.H.) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Is the project familiar with Office of Management and Budget, OMB Circulars which govern your organization? Circulars may be found at www.whitehouse.gov/omb/circulars . | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Comments:

2. FIDELTY BOND CERTIFICATE - COMMUNITY BASED ORGANIZATIONS (CBO) & AMERICAN INDIAN ORGANIZATIONS ONLY

- | | | | |
|---|--------------------------|--------------------------|-------------------------------------|
| • Obtain copy of required Fidelity Bond Certificate? [R.H. Section 2161] Does <u>not</u> apply to state, city, or county units of government. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| • Does the certificate show: | | | |
| ○ Bonding company's name | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ○ Bond number | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ○ Description of coverage | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ○ Amount of coverage (50% of allocation) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ○ Bond period | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ○ Grant award number | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ○ Form A, Employee Dishonesty | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ○ Form B, Forgery Coverage | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ○ Is the State of California, California Emergency Management Agency named on the bond as the beneficiary? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Comments:

3. ENVIRONMENTAL IMPACT – CEQA COMPLIANCE (R.H. Section 2153)

- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| • Does the project have its CEQA documentation on file?(Ask to view) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ○ Certified Exempt | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ○ Recipient has adopted or certified an environmental document which complies with the requirements of CEQA. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Comments:

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SECTION I – ADMINISTRATIVE and PROGRAMMATIC REVIEW (Continued)

4. PROOF OF AUTHORITY (R.H. Section 1350)

YES NO N/A

- Does the project have a written authorization/resolution on file as required by the Grant Award Agreement? (Ask for copy)

☒ ☐ ☐

Comments:

For continuously funded grants authorization for grant application has been incorporated into the Preliminary Budget process, eliminating the need to file a separate Board letter for approval of each grant application.

5. ORGANIZATIONAL CHART

- Review the organizational chart. Are all budgeted positions identified?

☒ ☐ ☐

Comments:

6. Cal EMA MODIFICATION (Cal EMA 2-223)

- Review the purpose/preparation of Grant Award Modification Request (Cal EMA 2-223). [R. H. Section 7500] (*Instruct project staff on the procedure to obtain the most recent forms from Cal EMA's website.*)
A modification is needed for the following:

☒ ☐ ☐

- ☐ Budget changes
- ☐ Change in key personnel
- ☐ Adding/changing additional signers
- ☐ Change goals/objectives, or activities
- ☐ Address change
- ☐ Other

Comments:

7. PERSONNEL POLICIES

- Does the project staff have access to written personnel policies as required? [R. H. Section 2130]
- Do the personnel policies include:
 - Work hours
 - Compensation rates including overtime and benefits
 - Vacation, sick, and other leave allowances
 - Hiring and promotional policies

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SECTION I – ADMINISTRATIVE and PROGRAMMATIC REVIEW (Continued)

- Do the personnel files include:
 - Staff note: Complete a sample review of a personnel file ☒ ☐ ☐
 - Job application ☒ ☐ ☐
 - Resume ☒ ☐ ☐
 - Performance evaluations ☒ ☐ ☐
 - Salary rates ☒ ☐ ☐
 - Benefits ☒ ☐ ☐
 - Current job duties/descriptions ☒ ☐ ☐
 - Other terms of employment ☒ ☐ ☐
- Does the project have a current Drug Free Workplace policy statement on file signed by the employee? [R. H. Section 2152] ☒ ☐ ☐
- Did the Board approve the agency's existing personnel policy? ☒ ☐ ☐

Comments:

Not all jobs may require a resume.

8. FUNCTIONAL TIMESHEETS

- Does the project use functional timesheets for each grant funded position less than 1 FTE? OR Time Study Allocation plan updated within the last 2 years? [R. H. Section 11331] ☒ ☐ ☐
- Are timesheets (paid staff & volunteer) signed by staff & approved by supervisor? (Review timesheets to ensure signatures of staff and supervisor.) ☒ ☐ ☐

Comments:

timesheets are electronically signed/approved by manager and submitted online, then they go to fiscal section for payroll processing

9. DUTIES OF FINANCIAL OFFICER AND BOOKKEEPER

- Are the duties of the financial officer and the bookkeeper separate to ensure no one person has complete authority over a financial transaction? ☒ ☐ ☐
 - Name of individual who approves purchases.
Ernestine Cook - Fiscal Manager
 - Name of individual who writes checks.
County Auditor's Office
 - Name of individual(s) who signs checks.
County Auditor

Comments:

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SECTION I – ADMINISTRATIVE and PROGRAMMATIC REVIEW (Continued)

10. SOURCE DOCUMENTATION-Fiscal [R. H. Section 11000]

- | | YES | NO | N/A |
|--|-------------------------------------|--------------------------|-------------------------------------|
| • Does the project maintain a record-keeping system which accurately supports costs claimed on Report of Expenditure and Request for Funds (Cal EMA Form 2-201)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Does the project maintain an accurate inventory log of equipment purchased with grant funds? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Comments:

supervisor approves hours then they go to fiscal for final approval. There is a separate code for each grant, which tracks salaries and benefits.

11. PROJECT EXPENDITURES

- | | | | |
|--|-------------------------------------|-------------------------------------|--------------------------|
| • Is the project's expenditure rate commensurate with the elapsed period of the grant? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Are the project's expenditures being made in accordance with the terms of the Grant Award Agreement? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Does the project need to submit a Grant Award Modification Request (Cal EMA Form 2-223)? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| • Is the project up-to-date with the submission of Cal EMA Form 2-201? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Comments:

12. MATCH REQUIREMENTS

- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| • Does the project have a match requirement? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Is the project meeting the match requirement? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Review the supporting documentation to substantiate cash or in-kind match. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Comments:

13. EEO POLICY

- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| • Go over EEO checklist. (Separate document) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--|-------------------------------------|--------------------------|--------------------------|

Comments:

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SECTION I – ADMINISTRATIVE and PROGRAMMATIC REVIEW (Continued)

GENERAL

YES NO N/A

14. PROGRAM GOALS AND OBJECTIVES

- Review the goals and objectives of the program and the programmatic requirements of the Grant Award Agreement. Is the project meeting the program's goals and objectives?
- Does the project need to submit Cal EMA Form 2-223 to modify grant objectives?

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Comments:

15. PROGRESS REPORT

- Discuss and review the programmatic Progress Report requirements.

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Comments:

16. SOURCE DOCUMENTATION-Programmatic

- Is the project maintaining a record keeping and data collection process that which accurately supports the project's reported data on the Progress Report form?
- Review the project's file system and data collection process.

☒ ☐ ☐

Comments:

17. OPERATIONAL AGREEMENTS

- Does the project have current Operational Agreements as required by the Grant Award Agreement?

☒ ☐ ☐

Comments:

18. PROJECT STAFF DUTIES

- Interview project staff and discuss their duties and the relationship to the grant. Are employees performing duties as stated in the Grant Award Agreement?

☒ ☐ ☐

Comments:

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Checklist Items	Yes	No	Comments
SUPPLEMENTAL PROGRAMMATIC REVIEW		EA09120560	
1. MANDATORY SERVICES			
a. Crisis Intervention			
(1) Provide in person/telephone contacts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Provide crisis intervention and arrange for needed services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Emergency Assistance			
(1) Arrange emergency assistance within the first 24 hours after initial contact	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Written procedures in place for disbursing funds	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(3) OA(s) on file with service providers (i.e. shelters)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Resource and Referral Assistance			
(1) Provide non-emergency referrals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) OA(s) on file with service providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
d. Direct Counseling			
(1) Provide in person or telephone guidance and/or emotional support	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) If counseling is provided, it is at a level that does not require a licensed professional	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(3) If counseling is referred, OA(s) on file with service providers	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Refer out, to therapist
e. Victims of Crime Claims			
(1) Assist clients in preparing applications for compensation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Advocate is aware their role does not include determination of eligibility	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(3) Is a joint Powers unit locally located	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
f. Property Return			
(1) Assist in the return of property held as evidence	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) If property cannot be returned, an explanation is provided	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Victim will get a packet explaining his/her rights, victim will be advised on the right to restitution			

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Checklist Items	Yes	No	Comments
SUPPLEMENTAL PROGRAMMATIC REVIEW (Continued)			
1. MANDATORY SERVICES (Continued)			
g. Orientation to the Criminal Justice System			
(1) Provide information on the location, procedures, and functions of local criminal justice agencies	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-going as case moves to different levels
(2) Written material/brochures are available in languages appropriate to local ethnic needs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
h. Court Escort			
(1) Provide physical accompaniment during court appearances	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Provide physical accompaniment during interviews with law enforcement and prosecution	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
i. Presentations and Training for Criminal Justice Agencies			
(1) Conduct informational presentations regarding resources available through V/W Centers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Train at the academy, different units in the office
(2) Conduct informational presentations explaining the rights and needs of victims	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Law enforcement topics, Elder Abuse topics, keeps a log of presentation
j. Public Presentations and Publicity			
(1) Promote public awareness of V/W services through public media	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Spanish Radio, Farm Worker and Mexican Consulate outreach, Presentations are limited because of funding
(2) Conduct presentations to victim service organizations and community groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(3) Participate in Victims' Rights Week	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
k. Case Status/Case Disposition			
(1) Advise victim of the progress and disposition of case	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Assist victim with preparing Victim Impact Statements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
l. Notification of Family/Friends			
(1) Notify victim's relatives and/or friends of the occurrence of the crime	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Upon request
m. Employer Notification			
(1) Notify employer that client was a victim/witness to a crime	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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(2) Encourage employer to minimize any loss of pay or other benefits	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Advise employer of labor code, most of the time easy to resolve
Checklist Items	Yes	No	Comments
SUPPLEMENTAL PROGRAMMATIC REVIEW (Continued)			
1. MANDATORY SERVICES (Continued)			
n. Restitution			
(1) Assist in obtaining restitution	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Both Victim/Witness and Restitution Specialist
(2) Provide the Probation Department, District Attorney, and Court with information relevant the victim's losses prior to the imposition of sentencing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Get in probation report, prepare it right away instead of years later
2. OPTIONAL SERVICES			
(1) Employer Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Creditor Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(3) Child Care Assistance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Have children's waiting room run by the court
(4) Witness Notification	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Witness coordinator unit does this
(5) Funeral Arrangements	<input type="checkbox"/>	<input checked="" type="checkbox"/>	assist with applications, assist with getting contracts
(6) Crime Prevention Information	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(7) Witness Protection	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Bureau of Investigation does this
(8) Temporary Restraining Order (TRO) Assistance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Develop safety plans
(9) Transportation Assistance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Transport victim, bus tokens
(10) Court Waiting Area	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. AGENCY ORGANIZATION			
a. Facility			
(1) V/W Center is open during normal business hours	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Waiting Room	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(3) Private Interview Room	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Personnel & Organization			
(1) Reporting lines of Authority are consistent with the Project Contact Information form	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Authorization for additional signature authority is current	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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(3) Evidence of completion of 40 hour Entry-Level Training	<input checked="" type="checkbox"/>	<input type="checkbox"/>	In personnel files
SUPPLEMENTAL PROGRAMMATIC REVIEW (Continued)			
b. Personnel & Organization (Continued)			
(4) Evidence of completion of Advance Training, if applicable	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A couple of the advocates need this
(5) Evidence of completion of Coordinator's Training, if applicable	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(6) Volunteers utilized as required	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Additional Comments / Notes:			
Objective #1 – Mandatory Services (see page 1 of checklist) Elder Abuse Advocacy & Outreach			
Objective #2			
During the grant year, increase the number of identified elder abuse victims as measured by the number of new victims and new cases.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Use past number and add 10%
Objective #3			
During the grant year, conduct awareness training sessions for direct service providers of elder abuse.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Have this discussion as team model all the time
Objective #4			
During the grant year, conduct presentations to potential elder victims to enhance victim awareness.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Objective #5			
During the grant year, provide referrals to agencies serving elder abuse victims.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Objective #6			
During the grant year, conduct a minimum of 12 local meetings of the operational participants in the (original) RFP.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Additional Comments / Notes: sample caseloads are reviewed monthly to make sure information is being tracked			